

Firelands Regional Medical Center School of Nursing
Nursing Care Map

Student Name _____

Date _____

Noticing/Recognizing Cues:

Highlight all related/relevant data from the Noticing boxes that support the top priority problem

Assessment findings*:

- Lochia=Rubia, small amount
- QBL=50 mL
- **Second degree perineal laceration**
- BP= 143/73
- **Edema of perineum**
- **Pain at stiches= 3/10**
- Pulse rate= 111 bpm
- Fundus is below umbilicus and right of midline

Lab findings/diagnostic tests*:

- **WBC=15.3 H**
- **Hgb=11.5L**
- Hct=33.8L
- Urine protein= Trace H
- Urine ketones= 1+H
- Urine occult blood= 3+H
- GBS positive

Risk factors*:

- **Former smoker**
- **Precipitous delivery**
- Issues with nausea and vomiting throughout pregnancies
- **Positive for THC and nicotine**
- **Currently vaping**

Interpreting/Analyzing Cues/
Prioritizing Hypotheses/
Generating Solutions:

Nursing priorities*:

Highlight the top nursing priority problem

- Impaired skin integrity** -Risk for infection
- Knowledge deficit -Risk for postpartum hemorrhage
- Acute pain

Goal Statement: The patient will demonstrate evidence of perineal wound healing within 5 days postpartum.

Potential complications for the top priority:

1. Infection
 - Increased pain at the laceration site
 - Purulent or foul-smelling lochia and drainage
 - Redness, warmth, or swelling around perineum
2. Delayed wound healing/ dehiscence
 - Separation of stiches or gaping wound edges
 - Perineal pain beyond expected healing
 - Serosanguinous or continuous discharge from wound
3. Perineal hematoma
 - Perineal pain not relived by usual measures
 - Swelling at perineum
 - Drop in hemoglobin/ hematocrit or signs of hypovolemia

Responding/Taking Actions:

Nursing interventions for the top priority:

1. Assess vital signs q4 hr or PRN if needed.
 - To monitor for change or worsening of condition
2. Complete postpartum assessment q4 hr or PRN as needed.
 - To monitor for any potential complications after giving birth
3. Assess second degree perineal laceration q4 Hr or PRN as needed
 - To monitor for any change in perineal laceration.
4. Give Ibuprofen 600mg q6Hr if needed.
 - To help manage pain
5. Give Acetaminophen 1000mg PO q4 hr if needed.
 - To help manage pain
6. Monitor labs q24 hr or PRN
 - To see any change or worsening of lab values
7. Educate on breast feeding and possible engorgement once or PRN if needed
 - To make sure mother knows what to do to stop milk production and what to report
8. Educate on what to report to HCP when continuing to recover at home once or PRN as needed
 - To measure early in any complications. She should report a fever 100.4°F or greater, increasing pain, redness, or swelling at episiotomy, or an increased vaginal bleeding and passing clots larger than a quarter (Linnard-Palmer & Coats, 2025).

Reflecting/Evaluate Outcomes:

Evaluation of the top priority:

- Second degree perineal laceration= Second degree perineal laceration
- Edema at perineum= No edema at swelling
- Pain at stitches 3/10= Pain at stitches 2/10

Continue Plan of Care

Reference: Linnard-Palmer, L., & Gloria Haile Coats. (2025). *Safe maternity and pediatric nursing care*. F.A. Davis.